Underground Storage Tank



Check those activities which apply: X Tightness Testing Checklist

☐ Retrofit/Repair checklist

☐ Cathodic Protection Checklist

JUL 1 6 2004 EPA - WOO

The attached Underground Storage Tank (UST) checklists are required for each of the listed activities. The checklists certify that Tightness Testing, Retrofit/Repair and/or Cathodic Protection activities are performed and conducted in accordance with Chapter 173.360 WAC. Complete this form and the corresponding UST checklist for each activity checked above.

See back of form for instructions.

	N AND OWNER 9 1 00 1 45 S n Master Business License)	Site ID Number: EPA 4-260087 (Available from Ecology if tank is registered)
Site/Business Name:	Smitty's # 140	
Site Address:	520 E Columbia Dr	
	Street	County
	Toppenish V	Vashington 98948
	City State	Zip+4 (required)
Telephone:	509-865-5909	
UST Owner/Operator:	RH Smith Dist	
Mailing Address:	PO Box 6	
	Street	P.O. Box
	Grandview V	/ashington 98930
-	City State	Zip+4 (required)
Telephone:	800 832 4507	
2. FIRM PERFORMING WO	BK	
Service Company:		ironmental Services, Inc.
Service Company.	Northwest Falls & Elly	nonnental Services, Inc.
Service Co. Address:	1720 100th PI SE, Suit	
	Street	County
_	Everett Washing	on 98208-3826
	City State	Zip+4 (required)
Certified Supervisor:	Erik Snyder	
Address:	1720 100th PI SE, Suit	e 101
-	Street	P.O. Box
	Everett Washingt	on 98208-3826
	City State	Zip+4 (required)
	22 116 22025446	E(40/0000
IFCI Certification Number:	32-US-32025440	Certification issue Date (Month/Year): 5/19/2003
Telephone:	(425) 742-9622	

Ecology is an equal opportunity and affirmative action employer For special accommodation needs, please contact the Underground Storage Tanks Section at (360) 407-7170.

Underground Storage Tank

Tightness Testing Checklist

Site II	# 4-260087
Site A	ddress 520 E Columbia Dr
City	Toppenish

For more than four UST systems, you may p	motocopy this form prior to comp	neting.
I. TIGHTNESS TESTING METHOD	Date of Test:	3/23/2004
1 Tightness testing method(s) used (indicate if mother Test method name/version 区 Accurite □ 20 Test method Manufacturer 区 Services and Train □ USTest - Sound Services	01 / P	sed): I 2000 / U
Note: A tank must be tested up to the product level limited device is not installed, a tank must be tested up to the methods are used, the tank must be; 1) filled with product level must be tested using a nonvitightness testing.	he 95% full level. When underfill product to the 95% full level or 2)	volumetric testing the portion of the tank
Indicate the method used to determine if groundwater was for single wall tanks):	present above the bottom of the t	ank during the test (require
 □ Weekly manual gauging □ Daily manual inventory control □ Automatic tank gauging (ATG) 	ason for conducting tightness of Required for release detection Bring temporarily closed tank Tank or piping repair Other (describe)	on requirement
☐ Tank tightness test only ☐ Line tightness test only ☐ Total system test (tank and lines tested togeth ☑	st method type: Overfill volumetric Underfill volumetric Nonvolumetric Volumetric	
I. TEST METHOD CHECKLIST		
The following items shall be initialed by the Certified Superv	isor whose signature appears on t	
1. Has the tightness testing method used been demonstrated to performance standard specified in the UST rules for the con- the test was conducted? (e.g., detecting a 0.10 gallon per h- probability of detection of at least 95% and a probability	nditions under which our leak rate with	Yes No N/A*
Have all written testing procedures developed by the manufled equipment and method been followed while the test was been followed.		× des
3. Was the product level in the tank during the test within the test methods performance standards?	limitations of the	× B
4. If groundwater was present above the bottom of the tank, he procedures accounted for its presence? (required for single		□ □ ×BS
5. If the tightness test is considered a failed test, has the owne notified of the test results? (Note: Tank owner must report test as a suspected release within 24 hours to UST staff at the	t a failed tightness	□ □ ×Z6S

Site II	# 4-260087
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City	Toppenish

Tightness Testing Checklist (continued)

III. TANK INFORMATION CHECKLIST

	Tank 1	Tank 2	Tank 3	Tank 4
Tank ID# (tank name registered with Ecology)		1		•
2. Date installed				
3. Tank capacity in gallons	Reg	sup	Die	0
Last substance stored				
5. Number of tank compartments				
Tank type: (S) single wall; (D) double wall; (P) partitioned				
7. Is overfill device present? (Yes/No)		-		
Percentage of product in tank during test? (Volume % must comply with test method certification requirements)				
9. The test method used can detect a leak of how many GPH?	+/- 0.05	+/- 0.05	+/- 0.05	+/- 0.05
10. The numerical tank test results are? (In gallons per hour)				
11. Based on evaluating test results and conducting any retesting as necessary as per test protocol to obtain conclusive test results; the test results are?				

IV. Line Information

		Line 1	Line 2	Line 3	Line 4
Piping type:	(S) single wall; (D) double w	all s	S	S	
2. Pump type:	(T) turbine; (S) sucti-	on t	t	t	
3. (a) If turbine, is leak	detector present (Yes	/No) yes	yes	yes	
(1) If present, w	as lead seal intact? (Yes/No I	V/A) n/a	n/a	n/a	
(2) Line leak de	tector results? (Pass/l	Fail) pass	pass	pass	
(b) If suction, check	valve located at? (T) tank (P)	pum n/a	n/a	n/a	
4. The numerical line tes	t results are? (gallons per hour)	-0.02	-0.002	-0.003	
5. Line tightness test re	esults? (Pass/l	Fail) pass	pass	pass	

^{*} Inconclusive test results for tanks or piping will not be considered as valid tightness test for the purposes of complying with UST release detection regulations.

V. REQUIRED SIGNATURES

I hereby attest, that I have been the Certified Supervisor present during the above listed testing activities, and to the best of my knowledge they have been conducted in compliance with all applicable state and federal laws, regulations and procedures, pertaining to underground storage tanks.

3/23/2004	(= A-X)	Erik Snyder
Date	Signature of Certified Supervisor	Printed Name

Date